

Proof of Citizenship or Identity Needed
For Medi-Cal Applicants and Beneficiaries
Who Are U.S. Citizens or Nationals

A new law says *most* Medi-Cal applicants and beneficiaries who are U.S. citizens or nationals must provide proof of citizenship *and* proof of identity. Please provide the information checked below by _____.

Name of Applicant or Beneficiary (*First – Middle – Last*): _____

- ☐ This person is exempt or has met the requirements. We do not need any other proof.
- ☐ Please provide proof of *identity* for this person.
- ☐ Please provide proof of *citizenship* for this person.
- ☐ Please provide proof of *citizenship and* proof of *identity* for this person.
- ☐ We were not able to find this person's birth record. If this person was born in California, please fill out the enclosed *Request for California Birth Record* form and return it.

Name of Applicant or Beneficiary (*First – Middle – Last*): _____

- ☐ This person is exempt or has met the requirements. We do not need any other proof.
- ☐ Please provide proof of *identity* for this person.
- ☐ Please provide proof of *citizenship* for this person.
- ☐ Please provide proof of *citizenship and* proof of *identity* for this person.
- ☐ We were not able to find this person's birth record. If this person was born in California, please fill out the enclosed *Request for California Birth Record* form and return it.

Name of Applicant or Beneficiary (*First – Middle – Last*): _____

- ☐ This person is exempt or has met the requirements. We do not need any other proof.
- ☐ Please provide proof of *identity* for this person.
- ☐ Please provide proof of *citizenship* for this person.
- ☐ Please provide proof of *citizenship and* proof of *identity* for this person.
- ☐ We were not able to find this person's birth record. If this person was born in California, please fill out the enclosed *Request for California Birth Record* form and return it.

If you do not have the information asked for above, but are trying to get it, please let us know. Contact your local social services office, or fill out the enclosed *Affidavit of Reasonable Effort to Get Proof of Citizenship* form and return it.

County fills out this box

Case No: _____

Case Name: _____